PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application of Docket Number

| CLAIMS AS FILED - PART I (Column 1) | | | | | | mn 2) | - | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
|---|---|---|-------------------|--------------|---------------------------------|------------------|----------|---------------------|---|---------|-------------------------------|--|--|
| TOTAL CLAIMS | | | /± a | | (Column 2) | | ï | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | • | BASIC FEE | 355.00 | Op I | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 29 minus 20= | | . 29 | | ٠. ا | X\$ 9= | | OR | 1500 Sec. 15 | 522 | |
| INDEPENDENT CLAIMS / minus 3 = | | | | | 1 | | | X40= | | | X80= | 80 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | 2003 | | OR | ACOUNTY STATE | | |
| * If the difference in solumn 4 is less than your carte | | | | | | oluman C | | +135= | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | OR | <u>+270=</u> | Section 1 | |
| * If the difference in column 1 is less than zero, enter | | | | | | olumn 2 | | TOTAL | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | OR | TOTAL | 1312 | |
| (Column 1) (Column 1) | | | | | | (Column 3) | | SMALL | NTITY | OR | SMALL | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 46 | Minus | | 19 | | 5,5 | X\$ 9= | Z 0.00 | OR | X\$18= | | |
| | Independent | 4 | Minus | | 41 | | | - X40≡ | | OR | * X80= | | |
| | HINS I PHESE | ULTIPLE DEP | TIPLE DEPENDENT (| | LAIM THIS REPORT | \vec{k} | +135= | | OR | +270= | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL ADDIT, FEE | सम्बद्धाः अस्ति । स्टिन्स्य स्टिन्स | | TOTAL | | |
| | | | | | | | | | 2 7 8 | 91 (| | | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | NUN PREVI | HEST MBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| MON | Total | * **** | Minus | ** | | = | | X\$ 9= | , | OR | X\$18= | | |
| AMENDMENT | Independent | * | Minus | *** | T OL A114 | = |] | X40= | | OR | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | J | +135= | | OR | +270= | | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT, FEE | | |
| | | (Column 1) | | | ımn 2) | (Column 3) | | | | _ | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUN PREV | HEST MBER IOUSLY) FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | | = |]] | X40= | | | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDEN | | | | | |] | | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +270= | | |
| ** | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | | |
| | | her Previously Pa | | | | | er foi | und in the an | oropriate ho | x in co | lumn 1 | | |